

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	70029	1/1/02
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	70029	4/1/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
1 Original	3/27/00
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4 1	5/1/00
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If more than 150 claims or 10 actions
staple additional sheet here

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